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CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 21839 7590 09/30/2008 Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below BUCHANAN, INGERSOLL & ROONEY PC POST OFFICE BOX 1404 ALEXANDRIA, VA 22313-1404 (Depositor's name (Signature (Date A PTORNEY DOCKET NO CONFIRMATION NO. FIRST NAMED INVENTOR FILING DATE APPLICATION NO 8962 1034185-000076 12/07/2006 Hidetoshi Konno 10/573.050 TITLE OF INVENTION: PACKAGING AND FILLING APPARATUS AND PACKAGING MATERIAL CUTTING DEVICE PREV. PAID ISSUE FEE TOTAL FEE(S) DUE DATE DUE ISSUE FEE DUE PUBLICATION FEE DUE SMALL ENTITY APPLN. TYPE \$1440 12. 1810,00 12/30/2008 \$300 \$0 NO nonprovisional **EXAMINER** ART UNIT CLASS-SUBCLASS 053-075000 3771 HUYNH, LOUIS K 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list Buchanan, Ingersoll & (1) the names of up to 3 registered patent attorneys or agents OR, alternatively. Rooney PC ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed Tree Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3 ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (B) RESIDENCE: (CITY and STATE OR COUNTRY) (A) NAME OF ASSIGNEE TETRA LAVAL HOLDINGS & FINANCE S.A. Pully, SWITZERLAND Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🖾 Corporation or other private group entity 🚨 Government 4b Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) 4a. The following fee(s) are submitted: A check is enclosed 💹 Issue Fee Payment by credit card Form PTO-2038 is attached. 🔀 Publication Fee (No small entity discount permitted) The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 0.2–4800 (enclose an extra copy of this form) Advance Order - # of Copies _____twó____ 5 Change in Entity Status (from status indicated above) □ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office. December 29,2008 Matthe Authorized Signature __# Registration No. 32,814 Typed or printed name Matthew L. 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